+

0010/PTO Rev. 6/95	U.S. Department Patent and Trade		Attorney Docket	Number	16319-08293							
			First Named Inve	ntor	Calum Mu	rray						
COMBINED DECI 1.63) AND POWE		•	₹	COMPLETE IF KNOWN								
FOR UTILIT PATENT AI			Application Num	ber	Unassigned	l						
		·	Filing Date		Herewith							
			Group Art Unit									
[x]Declaration OR Submitted with Initial Filing	Sı	eclaration ubmitted after iitial Filing	Examiner Name		Unknown							
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
	RECOVERY ACCESS TO SECURE DATA											
the specification of which		(Title of A	pplication)									
[X] is attached hereto OR												
was filed on (MM/DD/YY												
Application Number [,				•						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal												
Regulations. § 1.56.												
I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.												
Prior Foreign Application Number(s)	Count		oreign Filing Date MM/DD/YYYY)	1	Priority t Claimed	Certified Copy Attached? YES NO						
				[] . [] [] []		. []						
[] Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:												
I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.												
Application Number(s)		Filing I	Date (MM/DD/YYYY		[] Addition	-						
			application numbers are									
				on a supplemental attached hereto.								
					Silect t							



DECLARATION							Page 2							
I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to														
patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Appl			Parent	ming							Danan	t Datan	Mumban	
Number	ication		mber	Parent Filing Date (MM/DD/YYYY)						Parent Patent Number (if applicable)				
· · · · · · · · · · · · · · · · · · ·	Number					(141141)	(y applicable)						avie)	
[] Additional U.S. or PCT international application					ers are l	isted or	ı a suj	pleme	ntal pri	ority s	heet a	ttached	hereto.	
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:														
	Name	~	Reg	istration umber	on		Name							ation ber
Robert R. Sachs Jennifer R. Johnson Amir H. Raubvogel			50	42,120 50,784 37,070										
[] Additional atte	orney(s) and	d/or agent(s) n	amed on	a supp	lement	al sheet	attac	hed her	eto.					
Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto. Please direct all correspondence to: Jennifer R. Johnson Fenwick & West LLP Silicon Valley Center 801 California Street Mountain View, CA 94041														
					U.S.A									
Telephone (650	Telephone (650) 335-7213						Fax	(650) 938-5200						
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole o	r First Ir	ventor:	[]	A pe	tition h	as been	filed	for this	s unsig	ned inv	ventor	•		
Given Name Calum	Colum						Murrov						Suffix	
Inventor's Signature Date 03-29-04														
Residence: City	Petaluma			ate	CA	Coun	itry	USA			Citiz	enship	Britis	h
Mailing Address 1904 Westminster Lane														
Mailing Address														
City Petaluma State CA Zip 94954 Country USA														
[x] Additional inventors are being named on supplemental sheet(s) attached hereto														

DECLARATION						ADDITIONAL INVENTOR(S) Supplemental Sheet								
Name of Additional Joint Inventor, if any:] A petition has been filed for this unsigned inventor								
Given Name Jeff Mid						Family Name Mendonca			Suffix					
Inventor's Signature			Date 3/29 /04						·					
Residence: City Cupertino			State	CA		Countr	у	USA			Citiz	zenship	USA	
Mailing Address 19500 Pruneridge Ave., #10109														
Mailing Address	lailing Address													
City Cupertino			State	CA		Zip 95014 Country			try	USA				
Name of Additio	onal Joint Inventor,	if an	y:	Ī] A	petitio	n ha	s been 1	filed fo	r this	unsig	ned inve	entor	
Given Name		Middle nitial			Family Name						Suffix			
Inventor's Signature	•			Date						· · · · ·	· · · · · · · · · · · · · · · · · · ·			
Residence: City		. 5	State		Country			Citizensl		zenship				
Mailing Address	Mailing Address													
Mailing Address												•		
City		State	ate Zip Country											
Name of Addition	onal Joint Inventor,	if an	y:	[] A	petitio	n ha	s been i	filed fo	or this	unsig	ned inve	entor	
Given Mic Name Init			e		Family Suffix Name						Suffix			
Inventor's Signature			<u> </u>	· · · ·					Date				l	
Residence: City		State			T	Countr	у			Cit		zenship		
Mailing Address														
Mailing Address														
City			State			Zip	_			Coun	try			
Name of Additional Joint Inventor, if any: [] A petition has been filed for this unsigned inventor														
Given Name	Middle Initial							Suffix						
Inventor's Signature									Date					
Residence: City	State				Country Citizenshi					zenship				
Mailing Address														
Mailing Address														
City			State			Zip				Coun	try			